

WEEKLY PAYROLL REPORT FORM

Company Name: Prime Contractor

Project Name: Subcontractor

Awarding Auth.: List Prime Contractor:

Work Week Ending: Employer Signature:

Print Name & Title:

Employee Name & Address	Work Classification	Hours Worked							(A)	(B)	Employer Contributions			(F)	(G)
									Tot. Hrs.	Hourly Base Wage				[B+C+D+E] Hourly Total Wage (prev. wage)	[A*F] Weekly Total Amount
											(C) Health & Welfare	(D) Pension	(E) Supp. Unemp .		
		S	M	T	W	T	F	S							

NOTE: Every contractor and subcontractor is required to submit a copy of their weekly payroll records to the awarding authority.